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**FAX TRANSMISSION****DATE:** April 4, 2005**PTO IDENTIFIER:** Application Number 09/811,359  
Patent Number**Inventor:** Tacyoung Yoon et al.**MESSAGE TO:** US Patent and Trademark Office**FAX NUMBER:** (703) 872-9306**FROM:** EDWARDS & ANGELL, LLP  
John B. Alexander, Ph.D.**PHONE:** (617) 439-4444**Attorney Dkt. #:** 49662(72021)**PAGES (Including Cover Sheet):** 33**CONTENTS:** Amendment Transmittal (1 page)  
Amendment (30 pages)  
Certificate of Transmission (1 page)

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PTO/SB/97 (09-04)

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Application No. (if known): 09/811,359

Attorney Docket No.: 49662 (72021)

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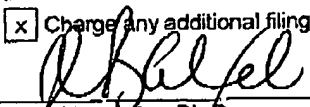

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Amendment Transmittal (1 page)  
Amendment (30 pages)

AMENDMENT TRANSMITTAL LETTER				Docket No. 49662 (72021)	
Application No. 09/811,359		Filing Date March 16, 2001		Examiner T. N. Truong	
				Art Unit 1624	
Applicant(s): Taeyoung Yoon et al.					
Invention: 5-SUBSTITUTED ARYLPYRIMIDINES					
<b>TO THE COMMISSIONER FOR PATENTS</b>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims		- 20 =		x	
Independent Claims		- 3 =		x	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>					0.00
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity					
<input checked="" type="checkbox"/> No additional fee is required for this amendment.					
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>04-1105</u> as described below. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
 John B. Alexander, Ph.D. Attorney Reg. No.: 48,399 EDWARDS & ANGELL, LLP P.O. Box 55874 Boston, Massachusetts 02205 (617) 439-4444				Dated: <u>April 4, 2005</u>	
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Docket No. 49662 (72021)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

**APPLICANT:** T. Yoon, et al.

**SERIAL NO.:** 09/811,359

**EXAMINER:** Y. N. Truong

**FILED:** March 16, 2001

**GROUP:** 1624

**FOR:** 5-SUBSTITUTED ARYL PYRIMIDINES

**Mail Stop: No-fee Amendment**  
**Commissioner for Patents**  
**P.O. Box 1450**  
**Alexandria, VA 22313-1450**  
.....

**AMENDMENT**

Applicants are in receipt of the Office Action dated January 4, 2005 and request reconsideration of the above-identified application in view of the following amendments and remarks. Please amend the above-identified application as follows:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks/Arguments** begin on page 28 of this paper.